



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

May 24, 2024

Krystyna Badoni
Battle Creek Bickford Cottage, L.L.C.
13795 S. Mur-Len Road Suite 301
Olathe, KS 66062

RE: License #: AH130278262
Investigation #: 2024A1010032
Battle Creek Bickford Cottage

Dear Licensee:

Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan is required. The corrective action plan is due 15 days from the date of this letter and must include the following:

- How compliance with each rule will be achieved.
- Who is directly responsible for implementing the corrective action for each violation.
- Specific time frames for each violation as to when the correction will be completed or implemented.
- How continuing compliance will be maintained once compliance is achieved.
- The signature of the authorized representative and a date.

If you desire technical assistance in addressing these issues, please feel free to contact me. In any event, the corrective action plan is due within 15 days. Failure to submit an acceptable corrective action plan will result in disciplinary action.

Please review the enclosed documentation for accuracy and contact me with any questions. In the event that I am not available and you need to speak to someone immediately, please contact the local office at (517) 241-1970.

Sincerely,

A handwritten signature in blue ink that reads "Lauren Wohlfert".

Lauren Wohlfert, Licensing Staff
Bureau of Community and Health Systems
350 Ottawa NW Unit 13, 7th Floor
Grand Rapids, MI 49503
(616) 260-7781
enclosure

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF COMMUNITY AND HEALTH SYSTEMS
SPECIAL INVESTIGATION REPORT**

I. IDENTIFYING INFORMATION

License #:	AH130278262
Investigation #:	2024A1010032
Complaint Receipt Date:	02/02/2024
Investigation Initiation Date:	02/05/2024
Report Due Date:	04/03/2024
Licensee Name:	Battle Creek Bickford Cottage, L.L.C.
Licensee Address:	Suite 301, 13795 S. Mur-Len Road Olathe, KS 66062
Licensee Telephone #:	(913) 782-3200
Administrator:	Angela Rafferty
Authorized Representative:	Krystyna Badoni
Name of Facility:	Battle Creek Bickford Cottage
Facility Address:	3432 Capital Avenue Battle Creek, MI 49015
Facility Telephone #:	(269) 979-9600
Original Issuance Date:	12/29/2006
License Status:	REGULAR
Effective Date:	10/15/2023
Expiration Date:	10/14/2024
Capacity:	55
Program Type:	AGED ALZHEIMERS

II. ALLEGATION(S)

	Violation Established?
Items in the freezer and refrigerator are stored uncovered and not dated.	Yes
The kitchen is dirty, and surfaces are not cleaned.	Yes

III. METHODOLOGY

02/02/2024	Special Investigation Intake 2024A1010032
02/05/2024	Special Investigation Initiated - Letter APS referral emailed to Centralized Intake
02/05/2024	APS Referral APS referral emailed to Centralized Intake
02/08/2024	Inspection Completed On-site
05/24/2024	Exit Conference

ALLEGATION:

Items in the freezer and refrigerator are stored uncovered and not dated.

INVESTIGATION:

On 2/2/24, the Bureau received the allegations via a mailed written letter. The complaint read, "The refrigerators that house opened foods, and frozen food (not dated). There is frozen meat that is freezer burns needs to be discarded. There is no lid on kitchen garbage containers, and is too close to the food prep table."

On 2/5/24, I emailed an Adult Protective Services (APS) referral to Centralized Intake.

On 2/8/24, I interviewed Staff Person 1 (SP1) at the facility. SP1 stated he is the facility's newly hired kitchen manager. SP1 reported he is currently being trained by a regional staff person. SP1 said when he started at the facility, the kitchen needed organization and cleaning. SP1 and I inspected the reach in refrigerators and freezers. There were items stored that were not labeled, therefore it was unknown how long the food was stored. SP1 removed the food items that were not labeled or

dated. I also observed a tray of deserts that were on a cooling rack, uncovered and open to the elements.

Inspection of the dishwashing area revealed there were no test strips to verify the PH level for sanitizer or temperature of the dishwasher and dishes. It is unknown whether the dishwasher temperature reached the required 160 degrees Fahrenheit. Proper sanitation of dishes food is served on could not be verified.

I observed there were trash can lids easily accessible to cover the trash cans when food preparation was not taking place. I observed SP1 and SP2 were preparing the lunch meal, and the trash cans were uncovered. The trash cans were not near where the food was being prepared and the trash can lids were nearby.

APPLICABLE RULE	
R 325.1976	Kitchen and dietary.
	(5) The kitchen and dietary area, as well as all food being stored, prepared, served, or transported, shall be protected against potential contamination from dust, flies, insects, vermin, overhead sewer lines, and other sources.
ANALYSIS:	My inspection of the facility's kitchen on 2/8/24 revealed there were several food items stored in the reach in refrigerator that were not labeled or dated. There was also a tray of deserts on a cooling rack near the reach in refrigerator that were uncovered and open to the elements. The facility was not in compliance with this rule.
CONCLUSION:	VIOLATION ESTABLISHED

ALLEGATION:

The kitchen is dirty, and surfaces are not cleaned.

INVESTIGATION:

On 2/2/24, the complaint read, "the stove and grill are filthy. The stock room that houses the groceries is dirty, and food not properly dated. The garbage disposal is dirty inside, and out. The 'mop' sink station is very dirty, and is near stock rack of food. The kitchen floors are dirty."

On 2/8/24, SP1 reported he is still in the process of thoroughly cleaning the entire kitchen. SP1 acknowledged it was evident several cleaning tasks to maintain the kitchen were not done prior to when he started at the facility. I observed several countertop surface areas were dirty and it was evident they were not cleaned or

sanitized in a long period of time. I observed the mini refrigerator in the dining room was dirty and had a substance spilled on the bottom of the inside. It was evident the substance was there for a long period of time. I observed the mop storage area was dirty and disorganized with several dirty mops left out. This area was near a dry food storage area.

On 2/8/24, I interviewed SP2 at the facility. SP2 stated he is a regional kitchen staff person who is responsible for training new kitchen staff. SP2 stated he has been in the facility for the past couple of weeks to train SP1. SP2 acknowledged the issue with the cleanliness and organizational need of the mop storage area. SP2 reported he asked maintenance staff to assist and hang hooks to properly store mops and brooms. SP2 said he is actively working to correct this issue.

I observed the floors in the kitchen were clean and appropriate. SP2 reported there was an issue with third shift staff not moping the floor. SP2 stated he addressed this issue, and it has since been corrected. I observed the garbage disposal was clean inside and out. I observed the garbage disposal was in proper working order. I observed stove and its burners were clean and in good working order. I observed the lunch meal was being cooked on the stove top. SP2 reported the oven is in working order and has been used to cook several meals since he arrived at the facility.

APPLICABLE RULE	
R 325.1976	Kitchen and dietary.
	(6) Food and drink used in the home shall be clean and wholesome and shall be manufactured, handled, stored, prepared, transported, and served so as to be safe for human consumption.
ANALYSIS:	On 2/8/24, I observed several countertops surface areas in the kitchen were dirty and it was evident they had not been cleaned or sanitized for an extended period. I also observed the mini refrigerator in the dining room was dirty on the inside and food was stored in it. The mop storage area was also dirty and unorganized. SP2 stated there was an issue with third shift staff not moping, however that has been corrected. I observed the kitchen floors were clean and it was evident they were moped.
CONCLUSION:	VIOLATION ESTABLISHED

I shared the findings of this report with licensee authorized representative Krystyna Badoni.

IV. RECOMMENDATION

Upon receipt of an acceptable corrective action plan, I recommend the status of the license remain unchanged.



03/01/2024

Lauren Wohlfert
Licensing Staff

Date

Approved By:



05/23/2024

Andrea L. Moore, Manager
Long-Term-Care State Licensing Section

Date